

# MEMORANDUM

Agenda Item No. 3(A)(7)

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**TO:** Honorable Chairwoman Rebeca Sosa  
and Members, Board of County Commissioners

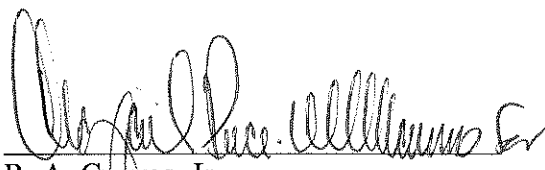
**DATE:** January 22, 2014

**FROM:** R. A. Cuevas, Jr.  
County Attorney

**SUBJECT:** Resolution retroactively  
authorizing in-kind services for  
the December 1, 2013 "Annual  
Holiday Celebration"

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The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Commissioner Sally A. Heyman.

  
R. A. Cuevas, Jr.  
County Attorney

RAC/smm




# MEMORANDUM

(Revised)

**TO:** Honorable Chairwoman Rebeca Sosa  
and Members, Board of County Commissioners

**DATE:** January 22, 2014

**FROM:**   
R. A. Cuevas, Jr.  
County Attorney

**SUBJECT:** Agenda Item No. 3(A)(7)

Please note any items checked.

- ☐ "3-Day Rule" for committees applicable if raised
- ☐ 6 weeks required between first reading and public hearing
- ☐ 4 weeks notification to municipal officials required prior to public hearing
- ☐ Decreases revenues or increases expenditures without balancing budget
- ☐ Budget required
- ☐ Statement of fiscal impact required
- ☐ Ordinance creating a new board requires detailed County Mayor's report for public hearing
- ☒ No committee review
- ☐ Applicable legislation requires more than a majority vote (i.e., 2/3's \_\_\_\_, 3/5's \_\_\_\_, unanimous \_\_\_\_) to approve
- ☒ Current information regarding funding source, index code and available balance, and available capacity (if debt is contemplated) required

Approved \_\_\_\_\_ Mayor  
Veto \_\_\_\_\_  
Override \_\_\_\_\_

Agenda Item No. 3(A)(7)

1-22-14

RESOLUTION NO. \_\_\_\_\_

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION AND OPEN SPACES DEPARTMENT FOR THE DECEMBER 1, 2013 "ANNUAL HOLIDAY CELEBRATION" SPONSORED BY CHABAD-LUBAVITCH RUSSIAN CENTER OF SOUTH FLORIDA, INC. IN AN AMOUNT NOT TO EXCEED \$790.00 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 4 FY 2013-14 IN-KIND RESERVE FUND

**WHEREAS**, Chabad-Lubavitch Russian Center of South Florida, Inc. has requested in-kind services from the Parks, Recreation and Open Spaces Department for the December 1, 2013 "Annual Holiday Celebration" in an amount not to exceed \$790.00 (see attached Fee Waiver/In-kind Service Application); and

**WHEREAS**, the purpose of the "Annual Holiday Celebration" event is to bring the community together for a family-oriented holiday celebration featuring music, art and cultural education; and

**WHEREAS**, Chabad-Lubavitch Russian Center of South Florida, Inc. is a not-for profit organization; and

**WHEREAS**, the "Annual Holiday Celebration" is a special event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and \$790.00 of the in-kind services shall be funded from the balance of the District 4 FY 2013-14 In-Kind Reserve Fund,

**NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA**, that this Board retroactively authorizes in-kind services from the Parks, Recreation and Open Spaces Department for the December 1, 2013 "Annual Holiday Celebration" sponsored by Chabad-Lubavitch Russian

Center of South Florida, Inc. in an amount not to exceed \$790.00 to be funded from the balance of District 4 FY 2013-14 In-Kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Sally A. Heyman. It was offered by Commissioner \_\_\_\_\_, who moved its adoption. The motion was seconded by Commissioner \_\_\_\_\_ and upon being put to a vote, the vote was as follows:

Rebeca Sosa, Chairwoman

Lynda Bell, Vice Chair

Bruno A. Barreiro

Jose "Pepe" Diaz

Sally A. Heyman

Jean Monestime

Sen. Javier D. Souto

Juan C. Zapata

Esteban L. Bovo, Jr.

Audrey M. Edmonson

Barbara J. Jordan

Dennis C. Moss

Xavier L. Suarez

The Chairperson thereupon declared the resolution duly passed and adopted this 22<sup>nd</sup> day of January, 2014. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA  
BY ITS BOARD OF  
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: \_\_\_\_\_  
Deputy Clerk

Approved by County Attorney as  
to form and legal sufficiency.

GKS

Gerald K. Sanchez

MIAMI-DADE COUNTY  
FEE WAIVER/IN-KIND SERVICES APPLICATION  
FY 2008-09

COUNTY FEE WAIVERS OR IN-KIND SERVICES REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

Please complete the following form and submit completed form along with requested materials, if applicable, to:

Office of Strategic Business Management  
111 N.W. 1<sup>st</sup> Street, Suite 2200  
Miami, FL 33128

Phone: (305) 376-5143  
Fax: (305) 376-5168

Type of Event/Application (select one of the following):

- ☐ District Event - Event of minimal impact related to specific commission district (Complete questions 1-7, sign and date; copy will be submitted to the appropriate District Commissioner within two days of receipt of application.)
- ☐ Small Event - Event of minimal impact not necessarily related to a specific commission district. (Complete questions 1-7, sign and date.)
- ☒ Special Event\* - Event with expected attendance of less than 5,000 with localized impact limited to an individual community or municipality (Complete questions 1-12, sign, date and submit form no later than 60 days prior to event date.)
- ☐ Major Event\* - Large Event with expected attendance of over 5,000 or significant probability of protests, controversy, violence or vandalism (Complete questions 1-12, sign, date and submit form no later than 120 days prior to event date.)

\*Note: Event budget must be included for "Special" and "Major" event types.\*

Commissioner sponsoring event SALLY HUMAN

1. Full legal name of the requesting organization: CHABAD RUSSIAN CENTER

2. Applicant Status: (Select one of the choices below)

- ☒ Not-For-Profit or Tax Exempt  
☐ For-Profit  
☐ Local Government or Public Entity  
☐ Other (specify): \_\_\_\_\_

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.): \_\_\_\_\_

RABBI ALEX KAUER  
305 - 803 - 5315

4. Specify fee waiver or in-kind service requested (quantify, if applicable): \_\_\_\_\_

MIAMI-DADE COUNTY  
FEE WAIVER/IN-KIND SERVICES APPLICATION  
Page 2

5. Name, date of event, description, and purpose of the event (If event is a fund-raiser, define the beneficiaries) \_\_\_\_\_  
\_\_\_\_\_  
ANNUAL HOLIDAY CELEBRATION  
\_\_\_\_\_  
TOWN CENTER PARK  
\_\_\_\_\_  
17200 COLLINS AVE, SUNNY ISLES BEACH  
\_\_\_\_\_  
\_\_\_\_\_  
SUNDAY DECEMBER 1st, 2013  
\_\_\_\_\_  
@ 3:30 PM  
\_\_\_\_\_

6. Please select ALL that apply to event:

- ☐ Economic Development: Event supports vitality or growth of the local economy
- ☒ Youth/Education: Event benefits youth of any age and/or offers educational benefits
- ☐ Health and Social Services: Event supports health-related causes and/or social programs or institutions that improve quality of life within the community
- ☒ Arts and Culture: Event supports music, theatre, literature, art or culture
- ☐ Environmental: Event benefits environmental concerns or promotes conservation
- ☐ Sports and Athletics: Event supports/promotes organized sports or recreational participation

7. Physical address of event venues (please specify Commission District(s)): AS ABOVE  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Description of regional or local impact: N/A  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

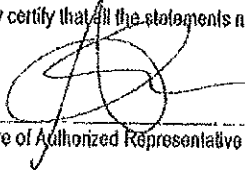
9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): \_\_\_\_\_

\_\_\_\_\_  
STAGE SET UP : 12 PM  
\_\_\_\_\_  
EVENT : 3:30 PM  
\_\_\_\_\_  
TAKE DOWN : 8 PM  
\_\_\_\_\_

MIAMI-DADE COUNTY  
FEE WAIVER/IN-KIND SERVICES APPLICATION  
Page 3

10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): N/A
11. Expected number of participants and estimated attendance (per day, if applicable): 300 PPL APPROX.
12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): N/A

I hereby certify that all the statements made in this application are true and correct.

  
Signature of Authorized Representative

9/30/2013  
Date

RABBI ALEX KALLER



SHOWMOBILES, STAGES, BLEACHERS,  
AND SOUND PRODUCTION  
(305) 226-8315 Ext. 224/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: CHABAD RUSSIAN CENTER

EQUIPMENT REQUESTED: LARGE STAGE + SET UP

NAME OF PERSON RESPONSIBLE FOR THIS BILL: COMMISSIONER  
SALLY HYMAN

OR INDEX CODE (MIAMI-DADE AGENCIES ONLY): \_\_\_\_\_

BILLING ADDRESS/ZIP CODE: \_\_\_\_\_

NAME/TITLE OF THE EVENT: HOLIDAY CELEBRATION

ADDRESS OF EVENT: TOWN CENTER PARK 17200 COLLINS AVE

TODAY'S DATE: 9.20.2013 DATE (S) & TIME OF EVENT: 12.01.13

SET-UP TIME & DAY: 12 pm 12/1

TAKE-DOWN TIME & DAY: 8 pm 12/1

CONTACT PERSON/PHONE: FABBI ALEX KALLER

AT SITE CONTACT/CELL PHONE#: 305 803-5315

SPECIAL INSTRUCTIONS: Direction item(s) are to be placed, maps, diagrams, etc.

OTHER INFORMATION: Include additional equipment if needed.

We, the users, understand that we assume full responsibility for any damage, theft, or loss to said equipment and its accessories between the time the Miami-Dade Park and Recreation Department completes setting up and the time it takes down. We, the users, also agree to adhere to the requests set forth in the rental policy. We do have a copy of the rental policy and fully understand the requirements set forth in renting the equipment requested as outlined in the rental policy. We also understand that the total fee is to be remitted (15) fifteen working days before the event.

\*Fee: \$790.00

Signature: \_\_\_\_\_

\*(SEE FEE SCHEDULE FOR EXACT CHARGES)

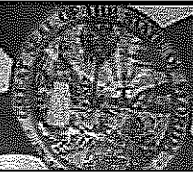
Agency/Group: CHABAD RC

CANCELLATIONS MUST BE MADE 72 HOURS IN ADVANCE OF THE  
EVENT BY FAX OR EMAIL. OTHERWISE EXPECT TO BE CHARGED

1/2 (HALF) OF RENTAL FEE. \*There will be no completed reservation on the schedule unless the  
confirmation Form is filled out completely and signed.

Late equipment arrivals, please call (786) 236-7926





## Detail by FEI/EIN Number

### Florida Non Profit Corporation

CHABAD-LUBAVITCH RUSSIAN CENTER OF SOUTH FLORIDA, INC.

### Filing Information

Document Number	N03000001084
FEI/EIN Number	043758388
Date Filed	02/07/2003
State	FL
Status	ACTIVE
Last Event	CANCEL ADM DISS/REV
Event Date Filed	10/27/2006
Event Effective Date	NONE

### Principal Address

403 POINCIANA DRIVE  
SUNNY ISLES BEACH, FL 33160

Changed: 04/02/2008

### Mailing Address

403 POINCIANA DRIVE  
SUNNY ISLES BEACH, FL 33160

Changed: 04/02/2008

### Registered Agent Name & Address

ROTH, AVROHOM N  
951 NE 167th Street #224  
N.MIAMI BEACH, FL 33162

Name Changed: 04/02/2008

Address Changed: 01/22/2013

### Officer/Director Detail

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# Memorandum



**Date:** January 22, 2014

**To:** Honorable Chairwoman Rebeca Sosa  
and Members, Board of County Commissioners

**From:** Carlos A. Gimenez  
Mayor

A handwritten signature in black ink, appearing to read "Carlos A. Gimenez", written over a horizontal line.

**Subject:** District Specific In-Kind Request

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A retroactive waiver for in-kind services has been requested by Chabad-Lubavitch Russian Center of South Florida, Inc., for their "Annual Holiday Celebration" event held on December 1<sup>st</sup>, 2013.

In-kind services have been requested in an amount not to exceed \$790.00 from the Parks, Recreation and Open Spaces Department for the use of a large stage. This event will be funded from the balance of District 4 FY 2013-14 In-Kind Reserve Fund.

A handwritten signature in black ink, appearing to read "Edward Marquez", written over a horizontal line.

Edward Marquez  
Deputy Mayor

Inkind01405